

O I P E  
DEC 29 2003

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  
 25859 7590 09/23/2003

WEI TE CHUNG  
 FOXCONN INTERNATIONAL, INC.  
 1650 MEMOREX DRIVE  
 SANTA CLARA, CA 95050

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/032,310	12/21/2001	Kun-Tsan Wu		6534

TITLE OF INVENTION: COLLIMATING DEVICE AND METHOD FOR MAKING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1,330.00	\$300	\$1,630.00	12/23/2003
EXAMINER	ART UNIT	CLASS-SUBCLASS			
COLLINS, DARRYL J	2873	359-652000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Wei Te Chung

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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HON HAI PRECISION IND. CO., LTD.

TAIPEI HSIEN, TAIWAN

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies \_\_\_\_\_ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

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Wei Te Chung

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01 FC:1501

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